NEWS NOTES

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GENERAL EISENHOWER PRAISES MEDICAL DEPARTMENT ON 171ST BIRTHDAY

Before an estimated crowd of more than 1,000, General of the Army Dwight D. Eisenhower paid homage to the Army Medical Department on its 171st anniversary on July 27 at Army Medical Center in a coast-to-coast radio broadcast.

Introduced by Brigadier General George C. Beach, Jr., commandant of Army Medical Center, General Eisenhower praided the Medical Department for its great successes before, during and since World War II.

"Even when viewed only from the narrow standpoint of battle line efficiency, the Medical Department was an invaluable asset to our commanders of this war," General Eisenhower stated. "In the recent European campaign 30,000 more wounded men were treated, healed and sent back to the front line than were numbered in the entire average strength of the Medical Department of that theater."

General Eisenhower heaped praise on the department for the "moral effect upon our fighting men of a human, devoted, efficient Medical Corps. Unbounded appreciation and admiration were freely given by combat soldiers to their comrades of the Medical Department," he stated.

"These sentiments were best expressed," the Chief of Staff explained,
"by the unamimous insistence of our front line regiments that their Medical
detachments be awarded a battle badge equivalent in its implication to the
one that decorated the combat infantry. A greater military accolade than this,
no department, no service, no unit could receive."

Major General Norman T. Kirk, The Surgeon General, declared that even though combat is ended, the Army retains its responsibility for keeping the soldier healthy and fit for duty. He described the Army doctor as the soldier's best friend and most intimate confidant.

GENERAL EISENHOWER PRAISES MEDICAL DEPARTMENT ON 171ST BIRTHDAY (Cont'd)

"When war struck, the Army Medical Department suddenly became the family physician and the nurse for the majority of the youth of this nation," he said. "This responsibility was accepted without equivocation. We will continue to be not only physician but friend and confident of all men in our charge— seeking not to minimize but to enlarge our responsibilities."

General Kirk said the Medical Department of the Army is now entering a new age of such promise that overwhelms the imagination. He briefly outlined some of the accomplishments of military medicine since the department was organized in 1775 and stated the Army Medical Department was now facing squarely into the future.

"We have helped win wars. We have helped preserve the Republic. We have implemented every other arm and service. It is better to look forward now into that new age of which we have seen the thunder-filled dawn," General Kirk said.

The observance at the Army Medical Center was one of many programs commemorating the Army Medical Department's birthday which were held throughout the country. Following the broadcast, General Eisenhower presented the Legion of Merit to Colonel Frank S. Gillespie, Royal Army Medical Corps, for his outstanding services as British medical liaison officer to the Army Medical Department.

ARMY MEDICAL DEPARTMENT BOARD LOCATED AT BROOKE ARMY MEDICAL CENTER, FT. SAM HOUSTON

Another important step in Army Medical Department's program to maintain its high level of treatment in the postwar era was taken in the establishment of the Medical Department Board at Brooke Army Medical Center, Fort Sam Houston, Texas.

During the war, the Board, previously located at Carlisle Barracks, Carlisle, Pa., was discontinued and its activities largely delegated to the field.

Headed by Brigadier General John M. Willis, USA, commanding officer of BAMC and former Surgeon, Middle Pacific Area, the Board will study changes that will be required in Army medicine to keep abreast of concepts of modern warfare. It will inform The Surgeon General on new techniques and act upon all matters referred to it by Major General Norman T. Kirk, The Surgeon General.

The Board will consider organization and equipment of medical units, tactical employment of Medical Department troops and changes and improvements in Medical Department equipment.

ARMY MEDICAL DEPT. BOARD LOCATED AT BROOKE ARMY MED. CENTER (Cont'd).

In accomplishing its mission, the Board will call upon civilian specialists in the various fields for advice in meeting specific problems. The Board will provide another instance where cooperation with civilian medical scientists is stressed.

General Willis, as chairman, will have four Medical Corps officers as Board members who performed distinguished service as key medical staff officers during the war. They are Colonel William E. Shambora, Colonel John F. Bohlender, Colonel James L. Snyder and Colonel Robert E. Peyton. Two additional medical officers will be appointed—one from Army Ground Forces and one from Army Air Forces.

FIRST 14 NEWLY-INTEGRATED REGULAR ARMY OFFICERS IN SGO ANNOUNCED BY GENERAL KIRK

Eleven of the first 13 officers to accept appointment in the Regular Army and be assigned to the Office of the Surgeon General were Medical Administrative Corps officers, Major General Norman T. Kirk announced.

Major Bernard Aabel, MAC, Major James B. Baty, SnC, and Major Guy C. Hill, MAC, were integrated in their present rank. Major Aabel of Onalaska, Wisc., will continue in his assignment in Office of Personnel, Military Personnel Division, Major Baty of Trenton, N. J., will remain in Preventive Medicine Division, Environmental Sanitation Branch, Sanitary Engineering Section, and Major Hill of Salt Lake City, Utah, will remain in Office of Plans & Operations, Troop Units Division.

As is the case of all MAC, SnC and Pharmacy Corps officers integrated into the Regular Army, the three officers accepted commissions in the Pharmacy Corps as a vehicle of integration. Legislation is now pending to create a Medical Service Corps which will embrace all three corps in the post-war Army.

Major Burt N. Coers, MC, of Memphis, Tenn., was integrated in the rank of Captain, MC. He is assigned to the Office of Plans & Operations, Education and Training Division. Training Doctrine Branch.

Heading the list of MAC officers integrated was Lieutenant Colonel Joseph C. Thompson, MAC, of East Haven, Conn. He was commissioned a Captain, PC. He is on duty in the Office of Supply, Storage & Maintenance Division.

Other Regular Army commissions were accepted by the following:

Major James J. Adams, MAC, of Ludington, Mich., Office of Supply, Storage & Maintenance Division as Captain, PC; Major James R. Francis, MAC, of Detroit, Mich., Executive Officer, Office of Plans & Operations, 1st Lieutenant, PC; Major R. L. Parker, MAC, of Kansas City, Mo., Office of

FIRST 14 NEWLY-INTEGRATED REGULAR ARMY OFFICERS IN SGO ANNOUNCED (Eont'd)

Supply, Distribution Division, Overseas Branch, Captain, PC; Major John H. Trenholm, MAC, of Arlington, Va., Office of Supply, Distribution Division, International Branch, 1st Lieutenant, PC; Captain Phillip J. Buckler, MAC, of Portland, Ore., Office of Plans & Operations, Hospital Division, 1st Lieutenant, PC; Captain William M. Hamilton, MAC, of San Antonio, Tex., Office of Supply, Distribution Division, Domestic Branch, 1st Lieutenant, PC; Captain Francis O. Chapelle, MAC, of Harrisville, Mich., Office of Plans & Operations, Education & Training Division, Training Doctrine Branch, 1st Lieutenant, PC; Captain William T. Covey, MAC, of Queen Ann, Md., Office of Personnel, Military Personnel Division, As Captain, PC.

NEW RECALL QUOTAS FOR ARMY NURSES, MEDICAL ADMINISTRATIVE OFFICERS ANNOUNCED

Recall quotas for 1,000 former Army Nurse Corps officers and 100 additional Medical Administrative Corps officers were announced by the War Department.

Major General Norman T. Kirk, The Surgeon General, said the recall of officers to active duty on a voluntary basis was necessary to insure the best possible care to some 90,000 patients remaining in Army hospitals throughout the world.

Other corps in the Medical Department which have been authorized recall quotas are Medical Corps, 100; Dental Corps, 100; Sanitary Corps, 50; Veterinary Corps, 25, and dietitians, 50. The first recall quota of 200 Reserve and National Guard officers authorized for the Medical Administrative Corps last spring has been met.

In general, all officers who return to active duty must qualify for general duty and be available for overseas duty. They will replace personnel eligible for discharge. As former officers, they must have an efficiency rating score of at least 35 to return in company grade and 40 points to return in field grade.

Nurses who come back into service will be given their choice of two categories. They may don their uniforms again to serve until relieved at the convenience of the government or for two years. Medical Administrative Corps officers may sign up for 12, 18, or 24 months or an unlimited length of time.

Former Army nurses have evidenced great interest in returning to active duty. Already, about 1,500 have notified the War Department they are ready to trade civilian life for further military duty. They will not be considered if they are married or have dependents under 14 years of age.

All applicants desiring recall for extended active duty should obtain application blanks from The Adjutant General, Washington 25, D. C.

EFFECTS OF EXTREME COLD STUDIED BY SURGEON GENERAL'S OFFICE

Extreme or prolonged cold tends to clot red blood cells so that they plug the circulation, which eventually results in development of gangrene and loss of limbs. This has been established, it was reported by the Surgeon General's Office, both by careful study of pathological tissue from overseas soldiers and experiments with rabbits in which limbs were subjected to temperatures of minus 30 centigrade.

The condition became of great importance in the European Theater during the last war. It was most dramatically exemplified among air crews subjected to the extreme temperatures four or five miles over the clouds. Even as exposure of a minute or so might result in the loss of a finger.

It was one of the chief causes of casualties in the Apennines campaign of the winter of 1943-44. Infantrymen sometimes stayed days at a time in fox-holes filled with slush and ice-cold water. When they were relieved they would be unable to walk and were in almost unbearable pain. Often this persisted for weeks after treatment and loss of toes was not infrequent.

The condition was one in which there had been little previous experience and its pathology was not understood.

A report on the samples of pathological tissue has just been made by Major Nathan B. Friedman of the Army Institute of Pathology. Several varying effects of cold were noted but in all cases were found the red blood cell "plugs" which had stopped the circulation and prevented its restoration. Hence part of a limb would lose its blood supply and gangrene would be the almost inevitable result.

The same condition could be produced in the rabbit limbs immersed half an hour in alcohol at minus 30 centigrade. This was a far more severe exposure than a soldier ever would be likely to encounter.

The clotting could be prevented in the rabbits, however, by injections of an anti-clotting substance known as heparin. Treated rabbits seemed little the worse off when their legs were thawed.

The rabbit experiments were carried out by Dr. Hurt Lange and David Weiner of the New York Medical College, working in cooperation with the Institute of Pathology.

COL. JOHN M. CALDWELL SUCCEEDS BRIG. GEN. MENNINGER AS DIRECTOR OF NEUROPSYCHIATRY CONSULTANTS DIVISION

Colonel John M. Caldwell, MC, is the new chief of Neuropsychiatry Consultants Division following Brigadier General William C. Menninger's separation from the Army on June 27.

Graduate of the University of Georgia, Athens, Ga., where he received his BS degree in 1925 and his Medical Degree in 1928, Col. Caldwell has been a student of psychiatry and internal medicine since 1929 when he won a fellowship for study at the Mayo Clinic, Rochester, Minn., following a year's internship in Duvall County Hospital, Jacksonville, Fla. He received his MS in medicine from the University of Minnesota, in 1932.

On December 10, 1932, Col. Caldwell was commissioned a First Lieutenant, MC, at Ft. Snelling, Minn., where he served as an internist in the Medical Service. From January until June, 1934, he saw duty at Medical Field Service School, Carlisle Barracks, Carlisle, Pa. For the next three years he served as medical officer at Fort Howard, Md.

In July of 1937, Col. Caldwell was assigned to Gorgas Hospital, Panama Canal Zone. While in Panama he also practiced in Corozal Hospital. He was assigned to St. Elizabeth's Hospital, Washington, D. C., in July, 1940. While there he was accredited by the American Specialty Board in Neurology and Psychiatry.

In 1941 he was assigned to the neuropsychiatry section, Walter Reed General Hospital, Washington, D. C., and became chief of that section before being transferred to Camp Robinson, Ark., Medical Department Replacement Training Center, in February, 1943. After two months at Camp Robinson he supervised the activation of the 54th General Hospital in Camp Ellis, Ill., on May 25, 1943.

The 54th General Hospital went overseas from Ft. Riley, Kan., on March 8, 1944, to New Guinea. From there it was transferred to the Phillipine Islands. In the fall of 1945, it was established in Tokyo. Deactivated as the 54th on December 10, 1945, the staff with Col. Caldwell as commanding officer continued operations as the 27th General Hospital.

Col. Caldwell returned to the United States on March 1 of this year and reported to understudy General Menninger on May 1, 1946,

COL. PFEFFER AWARDED LEGION OF MERIT

Colonel C. A. Pfeffer, MC, Commanding Officer of the Old Farms Convalescent Hospital at Avon, Conn., was recently awarded the Legion of Merit.

Award cited Colonel Pfeffer's outstanding service as Commanding Officer of the 45th General Hospital which saw service in the United States, Africa and Italy. Since his return to the United States, Colonel Pfeffer served for a short period at Fort McClellan. Ala.

Old Farms Convalescent Hospital is the only convalescent hospital as such in the United States and is the Army's rehabilitation center for blind soldiers only. All other convalescent hospitals were recently named convalescent annexes to General Hospitals.

"SHELL SHOCK" STUDY SHOWS FEWER CASES IN WORLD WAR II

Hysteria -- the so-called "shell-shock" of the first world war although probably a majority of its victims never heard a shell fired -- persisted on a greatly diminished scale among American troops in the last war, according to an announcement from the Surgeon General's Office.

It was predominantly a mental malady of the last generation. Essentially it is manifested as a syndrome which simulates, without organic basis, some pathological physical condition. A wictim will develop, for example, a paralyzed arm but physical examination shows that the paralyzed area does not follow any single nerve or group of nerves. A man may be suddenly stricken blind but nothing wrong can be found with his eyes or optic nerve.

A hysteric is not consciously faking. For all practical purposes his arm is really paralyzed or his eyes sightless. Questioning often will reveal that the victim has had a hard blow on the arm or gotten a bug in his eye. If such a condition is not recognized it may persist for years and the organ involved may actually become useless permanently through disuse.

At about the time of the first world war this was common enough both among the military and civilians. On the part of the soldier it was an unconscious flight from danger. A hysterically paralyzed arm was a means of running away without suffering any of the penalties.

Shortly after the war psychiatrists began to report that no hysterical cases were coming to their offices any more. Instead they were getting more and more cases of so-cabled "anxiety neurosis", an overwhelming fear without specific physical manifestations. It was explained that the pattern of reaction of the individual with a somewhat unstable nervous system was changing with the changing times. Hysteria was a disease of a simpler environment. - 7 -

"SHELL SHOCK" STUDY SHOWS FEWER CASES IN WORLD WAR II (Continued)

This persisted into the second world war. Many of the younger military psychiatrists never had seen an hysterical case and knew of the condition only through text-books.

They talked of "anxiety neuroses", "combat fatigue", and the like. For the most part, they were right. But, according to a study just reported by Lieut. Col. David B. Davis and Capt. John W. Bick of the Army Medical Corps, about one out of five of more than 1,000 neuropsychiatric cases returned to one American army hospital from overseas was actually a victim of hysteria.

"It is evident that hysteria was not of infrequent occurrence in World War Two", they conclude.

COL. BILLICK SUCCEEDS COL. FENTON AS DEPUTY CHIEF OF OPERATIONS

Colonel Eugene W. Billick, MC, for 32 months Chief Surgeon of Africa -- Middle East Theater with headquarters in Cairo, is now Deputy Chief of Operations in The Office of The Surgeon General.

He succeeds Colonel Bryan C. T. Fenton, who is now assigned to Brooke Army Medical Center, Fort Sam Houston, Texas.

Holder of a Medical Degree from the University of Pittsburg, '25, he completed his pre-med course at University of Pennsylvania. Colonel Billick served his internship at Fort Sam Houston Hospital, San Antonio, Texas. In rapid succession he attended Army Medical School and Medical Field Service School, Carlisle Barracks, Pa., before serving a year as Assistant Detachment Commander, Walter Reed.

After leaving Walter Reef, he went to Panama in 1928 where he served three years in Colon Hospital. Following that he was Secretary of MFSS, Carlisle Barracks, from 1931 to 1934. By 1936 he had successfully completed the last two-year course given at Command and General Staff School, Leavenworth, Kansas.

From 1936 to 1938, Colonel Billick was assistant personnel officer in charge of the Reserve Sub-division, SGO, and served as liaison officer to War Department General Staff. He graduated from Army War College in 1939 and went to the Phillipine Islands where he became assistant to the Department Surgeon.

Returning to the States in 1941 he served as Surgeon, 7th Division, at Ft. Ord, Calif., for a short while before returning as an instructor in the Medical Field Service School. In 1943, he left Carlisle and went overseas to Cairo.

Colonel Billick was born in Courtney, Pa., in 1896. His wife and three children are residing in Hibbing. Minn., until he can find housing accommodations in Washington. His oldest son was recently discharged from the Army Air Forces.

ARRIVALS, OFFICE OF THE SURGEON GENERAL

COLONEL WILLIAM S. STONE, MC, of Washington, D. C., formerly of Office of Air Surgeon assigned to Army Medical Research and Development Board, Overhead.

LIEUTENANT COLONEL WILLIAM F. ASHE, MC, of Cincinnatio Ohio, formerly of Headquarters USFET assigned to Preventive Medicine Division, Civil Public Health and Nutrition Branch.

LIEUTENANT COLONEL ROBERT W. W. EVANS, MC, of Lynchburg, Va., formerly of Separation Center No. 28, Fort Bragg, N. C. assigned to Office of Personnel, Overhead.

LIEUTENANT COLONEL HORACE C. GIBSON, MC, of Charlotte, N. C., formerly of Headquarters USFET, APO 757 assigned to Office of Personnel, Overhead.

LIEUTENANT COLONEL JOHN W. KEMBLE, MC, of Erie, Pa., formerly of MDRP Brooke Army Medical Center, Fort Sam Houston, Texas assigned to Office of Plans and Operations, Hospital Division.

LIEUTENANT COLONEL CLARENCE H. WALSH, MAC, of Pawtucket, R. I., formerly of Headquarters USFET, APO 757 assigned to Office of Personnel, Overhead.

MAJOR ROBERT CARGIN, MAC, of Staten Island, N.Y., formerly of MDRP Brooke Army Medical Center, Fort Sam Houston, Texas assigned to Office of Supply, Distribution Division Domestic Branch.

MAJOR JAMES H. CUNNINGHAM, DC, of Bar Harbor, Maine, formerly of Headquarters Command USFET, APO 757 assigned to Dental Division, Dental

Standards Branch.

MAJOR ROBERT A. KENNEDY, MC, of Hollywood, Calif., formerly of Head-

quarters USFET assigned to Office of Personnel, Overhead.

MAJOR FRANK K. LAWFORD, MAC, of Charlottesville, Va., formerly of Welch Convalescent Hospital, Daytona Beach, Fla. assigned to Office of Plans and Operations, Hospital Division.

MAJOR EDWARD P. SHANNON, JR., MC, of Santa Cruz, Calif., formerly of Headquarters USFET, APO 757 assigned to Office of Personnel, Overhead.

DEPARTURES. OFFICE OF THE SURGEON GENERAL

COLONEL FRANK B. BERRY, MC, of New York, N.Y., formerly of Surgical Consultants Division assigned to Separation Center, Fort Dix, New Jersey. COLONEL ESMOND R. LONG, MC, of Wayne, Pa., formerly of Medical

Consultants Division, reverts to inactive status,

COLONEL REX McK. McDOWELL, DC, of Orrville, Ohio, formerly of Dental Consultants Division, Dental Standards Branch assigned to McCornack General Hospital, Pasadena, California.

LIEUTENANT COLONEL THOMAS M. ARNETT, MC, of Clarksburg, W. Va., formerly of Office of Personnel, Overhead assigned to MDRP Brooke Army

Medical Center, Fort Sam Houston, Texas.

LIEUTENANT COLONEL ROBERT W. W. EVANS, MC, of Lynchburg, Va., formerly of Office of Personnel, Overhead assigned to MDRP Brooke Army Medical Center, Fort Sam Houston, Texas.

DEPARTURES, OFFICE OF THE SURGEON GENERAL (Continued)

LIEUTENANT COLONEL HORACE C. GIBSON, MC, of Charlotte, N.C., formerly of Office of Personnel, Overhead assigned to MDRP Brooke Army Medical Center, Fort Sam Houstoh, Texas.

LIEUTENANT COLONEL WILBUR W. HIEHLE, MC, of Stapleton, S.I., N. Y., formerly of Office of Personnel, Overhead assigned to MDRP Brooke Army

Medical Center, Fort Sam Houston, Texas.

LIEUTENANT COLONEL CLARENCE H. WALSH, MAC, of Pawtucket, R. I., formerly of Office of Personnel, Overhead assigned to MDRP Brocke Army

Medical Center, Fort Sam Houston, Texas.

CAPTAIN ARTHUR J. COLLINS, MAC, of Greensboro, N. C., formerly of Office of Personnel Division. Office of the Chief assigned to Tilton General Hospital. Fort Dix, New Jersey.

CAPTAIN EDNA M. CREE, ANC, of Colebrook, N. H., formerly of Historical Division, Overseas Branch assigned to Separation Center, Fort Dix, N. J.

CAPTAIN RALPH E. CROSS, MAC, of Washington, D. C., formerly of Office of Supply, Distribution Division assigned MDW General Bispensary, US Army, Pentagon, Washington, D. C.

CAPTAIN ANTHONY DeMATTIA, MAC, of New York, N.Y., formerly of Office of Plans and Operations. Education and Training Division, Troop Training Branch assigned to Halloran General Hospital, St. George, S.I., New York.

CAPTAIN LEON JACOBS, SnC. of Brooklyn, N. Y., formerly of Preventive Medicine Division, Environment Sanitation Branch assigned to Separation Center, Fort Dix. New Jersey.

CAPTAIN ROBERT J. MACMILLAN, MC. of Cincinnati, Chio, formerly of Physical Standards Division, Office of the Director assigned to Separation

Center, Fort Sheridan, Illinois.

CAPTAIN RUBY Z. WINSLOW, MDD, of Myricks, Mass., formerly of Dietetic Consultants Division assigned to MDRP Tilton General Hospital, Fort Dix, New Jersey.

PROMOTIONS, OFFICE OF THE SURGEON GENERAL

1st Lieutenant to Captain

VERNON E. BLYTHE, MAC. of Allen, Texas, of Office of Personnel, Military Personnel Service Procurement. Separation and Reserve Branch.

REASSIGNMENTS. OFFICE OF THE SURGEON GENERAL

COLONEL E. W. BILLICK, MC. of Monongahela, Pa., designated as Deputy Director for Operations, Office of Plans and Operations, SGO.

COLONEL RAYMOND E. DUKE, MC, of Washington, D. C., designated as Chief, Education and Training Division, Office of Plans and Operations, SGO.

COLONEL ROGER G. PRENTISS, JR., MC, of Chevy Chase, Md., designated as Deputy Chairman, Army Medical Research and Development Board, SGO.

COLONEL WILLIAM S. STONE, MC. of Washington, D. C., designated as Chairman, Army Medical Research and Development Board, SGO.

REASSIGNMENTS, OFFICE OF THE SURGEON GENERAL (Continued)

LIEUTENANT COLONEL EDWARD M. DeYOUNG, MC, of Okmulgee, Okla., transferred from duty as Director, Physical Medicine Consultants Division, SGO and assigned to Disposition and Retirement Branch, Physical Standards Division.

LIEUTENANT COLONEL CLARK B. MEADOR, MC, of Abilene, Texas, designated as Chief, Development Branch, Army Medical Research and Development Board.

LIEUTENANT COLONEL CHARLES B. PERKINS, MC, of Seattle, Washington,

designated as Chief, Mibitary Personnel Division, SGO.

LIEUTENANT COLONEL BENJAMIN A. STRICKLAND, JR., MC, of Lynchburg, Va., designated as Director, Physical Medicine Consultants Division, SGO.

MAJOR JOHN H. TRENHOLM, MC, of Arlington, Va., designated as Chief, International Branch, Distribution Division.Office of Supply, SGO.

CAPTAIN HARRY L. GALLAGHER, MAC, of Vincoski, Vermont, designated as Chief, Organization and Equipment Allowance Branch, Office of Plans and Operations, SGO.